

1 of 2

Attorney Docket No.: VISH-8728

rev. 10/04 kgr

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

	I hereby certify that this transmittal of the below described document is being deposited with the United States Postal Service in an envelope bearing First Class Postage and addressed to the Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450, on the below date of deposit.										
	Date of Deposit:	12/22/06		Mina Oliveri	Signature of the Person Making the Deposit:	Mine Glin					
	In re Application of: Deva Pattanayak and Robert Xu										
	Applica	ition No.:	10/726,922	Exami	ner: Jesse Fenty						
,	Filed: 1	2/2/03		Art Unit: 2815							
	Confirmation No.: 8797										
	For: CLOSED CELL TRENCH METAL-OXIDE-SEMICONDUCTOR FIELD EFFECT TRANSISTOR										
	Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 AMENDMENT TRANSMITTAL										
	Transmitted herewith is an amendment for this application										
	 X Transmitted herewith is a response to an office action for the above identified patent application. (8 sheets) Transmitted herewith are sheets of substitute formal drawings. Other: 										
	2. Applicant is other than a small entity										
	Extension of Term										
	3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.										
	(a) [X] Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)										
			Extension [X] one mont [] two months [] three mont [] four months [] five months	s hs s	Fee \$120.00 \$450.00 \$1,020.00 \$1,590.00 \$2,160.00 Fee \$ 120.00						
	If an additional extension of time is required, please consider this a petition therefor.										
	(b)	ļ		for the possibility	that applicant has inadve	er, this conditional petition is ertently overlooked the					
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Fee Calculation

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(for other than a sm	Claims Remaining After	Highest Number of Claims Previously Paid	Present Extra Claims	Fee Rate	Total		
Total Claims	Amendment 13	For - 13 =	0	x \$50.00	\$0.00		
Independent Claims	2	- 2=	0	x \$200.00	\$0.00		
Multiple Dependent Claim Fee (one or more, first added by this amendment) \$360.00							
Total Fees							

PAYMENT OF FEES

- 5. The full fee due in connection with this communication is provided as follows:
- [X] The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 23-0085.

 A duplicate copy of this authorization is enclosed.
- [X] A check in the amount of \$120.00
- [] Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 23-0085.

Please direct all correspondence concerning the above-identified application to the following address:

WAGNER, MURABITO & HAO LLP

Two North Market Street, Third Floor San Jose, California 95113 (408) 938-9060 Customer No: 36538

Respectfully submitted,

Date: December 22, 2006

Eric J. Gash Reg. No. 46,274

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